

ATTACHMENT C



EMPLOYEE DISCIPLINARY/CORRECTIVE ACTION NOTICE

EMPLOYEE NAME: Camille Harrison

DATE: 2/04/2013

AREA: Security

FACILITY: Turkey Point

SSN (LAST 4 DIGITS ONLY): 3957

TYPE OF ACTION:

☐ ORAL WARNING

☒ WRITTEN WARNING

☐ FINAL WARNING: Your job is in jeopardy. Failure to comply with the conditions of this warning will result in your termination

☐ SUSPENSION for _____ days

☐ DISCHARGE

REASON(S) FOR DISCIPLINARY ACTION:

On 2/02/2013, you were called on the radio by S-3 (Lt. Scott) and directed to report to the NEB Hallway at 0517. When you had not arrived in the hallway by 0531, you were called again by S-3 and when questioned about your location, you stated that you were still in the Security Response Center. You were again directed to report to the NEB Hallway. At this point, you walked to the Security Support Center, informed S-2 (Lt. Stewart) that you were feeling ill, turned off your primary radio, and went to the Security Shift Supervisor's office to request to leave work early. Subsequent radio calls by S-3 went unanswered. In accordance with WPO-1308, you are being issued this written warning, as this is a Level II offense for failure to meet satisfactory job performance or behavior standards in the opinion of management.

CORRECTIVE STEPS REQUIRED:

In the future, you are expected to comply with all reasonable requests from your supervisors. Additionally, you are expected to monitor your radio at all times, as you may be required to respond to a security emergency at any time.

ACTION TO BE TAKEN IF ISSUE IS NOT CORRECTED:

Future offenses will result in further disciplinary action.

SUPERVISOR'S REMARKS:

All Security Officers are expected to conduct their work in a professional manner, and to be productive members of this team. If, in the future, you are given directions by a supervisor and suddenly feel ill, you are expected to notify that supervisor so that he can make arrangements for you to go to Site Medical. Turning off your radio is unacceptable.

EMPLOYEE'S COMMENTS:

SIGNATURE OF EMPLOYEE:

(Signature does not mean agreement, but acknowledges that action was taken)

Camille Harrison

DATE: 01-07-2013

SIGNATURE OF SUPERVISOR:

Jim C. R.

DATE: 2/7/13

SIGNATURE OF WITNESS:

Charlton J. H.

DATE: 2/7/13

Employer Ex. 10